

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	P113/MII-79-61-03	
	First Named Inventor	Xu et al.	
	COMPLETE IF KNOWN		
	Application Number	Unassigned	
	Filing Date	Herewith	
	Group Art Unit	Unassigned	
		Examiner Name	Unassigned

☒ Declaration Submitted with Initial Filing
 OR
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MATERIALS AND METHODS FOR IMPRINT LITHOGRAPHY

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 3]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patent, Washington, DC 20231.

DECLARATION – Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number or Bar Code Label ☒ Correspondence address below

Name Kenneth C. Brooks, Molecular Imprints, Inc., Legal Department

Address P.O. Box 81536

City Austin

State Texas

ZIP 78708-1536

Country USA

Telephone (512) 527-0104

Fax (512) 527-0107

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Frank Y.

Family Name
or Surname Xu

Inventor's
Signature

Date

Residence: City Austin

State Texas

Country USA

Citizenship USA

Mailing Address 2811 La Frontera Blvd. Apt. 721

City Austin

State Texas

ZIP 78728-1187

Country USA

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Pankaj B.

Family Name
or Surname Lad

Inventor's
Signature

Date

Residence: City Austin

State Texas

Country USA

Citizenship USA

Mailing Address 2920 Thrushwood Drive STE A

City Austin

State Texas

ZIP 78757-6969

Country USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 3 of 3.**Name of Additional Joint Inventor, if any:**☐

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Given Name

(first and middle [if any]) Ian M.

Family Name

or Surname McMackin

**Inventor's
Signature****Date**

01/23/04

Residence: City Austin**State** Texas**Country** USA**Citizenship** USA**Mailing Address** 7700 N Capital of Tx Hwy #817**Mailing Address****City** Austin**State** Texas**ZIP** 78731-1175**Country** USA**Name of Additional Joint Inventor, if any:**☐

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Given Name

(first and middle [if any])

Family Name

or Surname

**Inventor's
Signature****Date****Residence: City****State****Country****Citizenship****Mailing Address****Mailing Address****City****State****ZIP****Country****Name of Additional Joint Inventor, if any:**☐

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Given Name

(first and middle [if any])

Family Name

or Surname

**Inventor's
Signature****Date****Residence: City****State****Country****Citizenship****Mailing Address****Mailing Address****City****State****ZIP****Country**

(page 3 of 3)

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.